POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	_B		05-01-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	JM	JC864	6/20/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ ....Rejected	N ....Non-elected	
= ....Allowed	I ....Interference	
— (Through numeral)... Canceled	A ....Appeal	
÷ ....Restricted	O ....Objected	

BEST AVAILABLE COPY

Claim Final	Original	4 16 03	10 29 03	7 30 04	Date							
1		✔	✔	✔								
2		✔										
3		✔	✔	✔								
4		✔	✔	✔								
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8		✔	✔	✔								
9		✔	✔	✔								
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Claims 51–100 and 101–150 blank.

If more than 150 claims or 10 actions
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